may judge from the reports of serious reactions and deaths, taken together with the marked changes at autopsy, these dyes probably cause important physical and chemical changes. Further study of their behavior in the body is desirable, and may lead to a better understanding of their therapeutic limitations. Besides this, much more experimental work needs to be done on their antiseptic efficiency, for such work always has been, and probably always will be, a valuable guide to clinical trials, the objections of Churchman to the contrary notwithstanding.

The value of experimental studies is reiterated in the recent work of Walker and Sweeney at the Hooper Foundation of the University of California Medical School, San Francisco. They state that the method of treating infected animals is not without analogy to the treatment of human bacteriemias by intravenous injection of chemotherapeuticals, and in any event, these experimental methods do give results that are strictly comparable with one another, and considerable experience indicates that they are the best evailable methods for measuring the relative chemotherapeutic action of different substances against the several bacterial infections. Using infected mice and different methods of administering different organisms and dyes under controlled conditions, Walker and Sweeney found that the therapeutic action is not equal for the several dyes against all types of bacterial infections. Each dye appeared to be more or less specific in its chemotherapeutic action. Gentian violet was effective only in staphylococcic infections, while mercurochrome subcutaneously was more effective in streptococcic than staphylococcic infections. Acriflavine was ineffective in the circulation. In fact, the therapeutic action of all these dyes was greatly reduced, if not wholly destroyed, when they were not brought into immediate contact with the infecting bacteria.

More work of the type of Walker and Sweeney's is needed. After sufficient experimental trial, extensive and properly controlled clinical trials should be made before the dyes can be used intravenously with safety and a reasonable degree of therapeutic success. Meantime, bearing in mind that clinical reports to date are contradictory, the results are uncertain and the dyes may do more harm than good, it would seem wiser to abandon their use intravenously in human subjects. Certainly the evidence at present is insufficient to warrant their extended and general use.

Churchman: J. Am. Med. Assoc., 1925, 85:1849, "Intravenous Use of Dyes."

Walker and Sweeney: J. Pharm, Exp. Therap., 1926, 26:461, "Chemotherapy of Bacterial Infections. I. Action of Acriflavine, Gentian Violet and Mercurochrome in Experimental Bacterial Infections."

CHARITY AS BIG BUSINESS

A visionary scheme was rediscovered and launched some years ago to convert the service of giving, consecrated by Jesus Christ and ordained an outstanding requirement of his followers, into a business to be operated upon a business basis to such an extent that, as one of the leaders in the scheme predicted, the people who ruled this new business venture were to become the "unofficial government."

The thing went off with such speed that mature

judgment was rolled flat before it could be expressed. The inevitable reaction is well under way and the time is not far distant when schemes to make charity not only business but Big Business, instead of the spiritual Christian attainment that Christ commanded his followers to practice in such secrecy that the left hand was not to know what the right hand doeth, will disappear. When these well paid promoters started out to substitute an "unofficial government" operated as a business for charity as it exists in the hearts of man, they lost sight of the fact that money and government and business efficiency are the least important elements of charity.

Communities do not need "unofficial governments." Things that are important enough and big enough to require government interest should be handled by official government. If official government fails to do its duty, the problem will be solved by making such government better, not by creating an "unofficial government" which is calculated to grow—as it has grown in places—into multiple unofficial governments. Charities that are not large enough to require government interest supply ample opportunities for the outpourings of the personal and group spirit of charity as Christ ordained it to be. We are on our way back to this sound road. The recent commendable action of the San Francisco Chamber of Commerce in creating a Council on Charity Funds, to function somewhat along the lines of their former Charities Endorsement Committee, is a step in the right direction.

No "unofficial government" has ever been able to enthuse those who serve or those who are to be served by substituting autocratic regulations of selected representatives for charity as it exists in the hearts of Christian people.

1926 **DUES**

All subscriptions to California and Western MEDICINE, included in membership dues in the California Medical Association, expire annually with the January issue.

Under the postal laws, California and West-ERN MEDICINE is required to drop from its mailing list unpaid subscriptions. Those members whose dues are not received from the secretaries of their county societies before March 1 will not receive CALIFORNIA AND WESTERN MEDICINE after that date until their membership is again in good standing. Those who desire to keep the files of their magazine complete should avoid this contingency, because California and Western Medicine has a very limited number of surplus copies with which to supply calls for back numbers.

Report on Antistreptococcus Serum-Of twenty-five leading surgeons, gynecologists and obstetricians who were questioned by Emil Novak, Baltimore (Journal A. M. A.), as to their opinion of antistreptococcus serum, sixteen considered it of no value, one said he knew nothing about it, and eight expressed the opinion that, while usually unsatisfactory, it might for certain indications be of real value. The chief of these was for a supposed protective or prophylactic action, while occasional good results are mentioned where the proper strain of streptococcus happens to be selected. Not a single one of the twenty-five questioned evinced any degree of enthusiasm for the serum.